



Edward Koerschner Memorial Scholarship Criteria

Dickinson Area Community Foundation

One or more scholarship recipient(s) will be chosen annually from Iron Mountain High School. The recipient(s) will receive a one-time scholarship award. The amount of the award(s) will be determined annually based on the income of the fund.

Eligibility:

1. The scholarship is available to graduating seniors of Iron Mountain High School.
2. Applicants must be entering the “trades” field through an apprenticeship, certificate, or associate degree program. Such fields of study include, but are not limited to: electrician, pipefitter, millwright, bricklayer, welder, etc. Funds could also be used for purchase of tools needed for the program or other equipment deemed necessary.
3. Applicants must have a GPA of at least 2.5 and have demonstrated the ability to succeed in their chosen program.
4. Applicants must submit an essay on why they have chosen their field of study.
5. Applicants must submit a letter from a teacher who has known the applicant for a minimum of one year. The reference letter must address the teacher’s perception of the student’s capabilities and skills to succeed in their chosen field of study. In addition, the reference letter should address the teacher’s perception of the student’s overall character.
6. Applications must be completed and on file in the guidance counselor’s office by **March 15**.
7. The scholarship is a one-time award only and may not be renewed.
8. A scholarship award may be revoked by the DACF Board of Trustees because of:
 - Criminal or anti-social conduct of recipient.
 - Filing false information on application.
 - For such other good cause as the Board may, in its sole discretion, determine.

Revocation shall be by the action of a majority of the members of the DACF Board of Trustees, and upon such revocation, any and all funds still controlled by the Board of Trustees shall be withheld and disposed of at the discretion of the Board.



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Completed applications must be submitted by March 15th

Date	
Full Name	
Street Address	
City ST ZIP Code	
Home Phone	
Email	
High School Attended	
GPA	
What extra-curricular activities did you participate in? Include in-school activities and activities outside of school. List position held, if applicable:	
Did you work during the school year?	If yes, how many hours/week:
Name of post high school program you plan to participate in:	
Have you applied for admission?	
Have you been accepted?	
Intended field of study:	
Have you applied for other scholarships?	
Have you been granted a scholarship? If so, name of scholarship & amount:	
Please include the following with the application:	
<ol style="list-style-type: none"> 1. A 1 to 2-page double-spaced letter of reference from a teacher who has known the applicant for a minimum of 1 year. The reference letter must address the teacher's personal perception of the student's capabilities and skills to succeed in their chosen field of study. In addition, the reference letter should address the teacher's perception of the student's overall character. 2. A 1 to 2-page double-spaced essay on why you have chosen your field of study. 3. A transcript of your high school records. 	

Application deadline	
All applications need to be submitted to the guidance counselor's office by March 15th .	
Applicant agreement and signature	
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.	
Name (printed)	
Signature	
Date	
Parent/guardian application form	
Name of parent or guardian completing this form:	
Home address:	
Phone:	
Do you have any other dependents or extenuating circumstances that should be considered? If yes, please explain:	
Please note here any additional information which may assist the scholarship selection committee in consideration of the applicant:	
Parent/guardian agreement and signature:	
I affirm that the statements above are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.	
Signature of parent or guardian:	
Date:	

RELEASE OF INFORMATION

I hereby certify that any information needed regarding my scholarship requirements be made available to the Director of the Dickinson Area Community Foundation and the Edward Koerschner Memorial Scholarship Committee.

Signature of Applicant: _____ Date: _____